



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 12/8/2021

Permit Number: *BP-2022-00001*

GPIN/Tax Map: 6779-27-0387-9998

Issued: *2-7-22*

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 2425 Goodluck Road, Maidens, VA 23102	
	Owner American Tower	Phone#
	Address 10 Presidential Way, Woburn, MA 01801	Email

APPLICANT INFORMATION	Applicant/Contact AT&T Mobility (C/O NB+C Katharine Poma)	Phone # 410-353-9116
	Address 6095 Marshalee Drive, Suite 300, Elkridge, MD 21075	Email kpoma@nbcllc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <i>N/A</i>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/GOA A2
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to footprint</i> Planning & Zoning Officer: <i>David Floyd</i> Date: <i>1/14/22</i>			

CONTRACTOR INFORMATION	Contractor TBD Jacobs Telecommunications	Phone
	Address	Email 502-811-1960
	Contractor License Number 2705066988	Type H/H

DESCRIPTION OF WORK	Scope of Work: AT&T Mobility proposes to perform modifications on existing cell tower, removing (6) antennas, (3) RRUs, and (3) TMAs, and installing (6) antennas and (12) RRUs				
	Proposed Use Telecommunications Tower	Current Use Telecommunications Tower	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	\$25,000
---------------	-----------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Katharine Poma Date 12/8/2021

Application Fee	\$ <u>187.50</u>
State Levy Fee	\$ <u>3.75</u>
Zoning Fee	\$ <u>100.00</u>
RLD	\$
SWP	\$
Total	\$ <u>291.25</u>



BUILDING PERMIT APPLICATION

Application Date: 01/27/2022Permit Number: BP-2022-00125

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

GPIN/Tax Map: 6185-45-0910/55-2-0-1-DIssued: 2-7-22
 Residential
 Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>984 LEE ROAD CROZIER VIRGINIA 23059</u>	
	Owner <u>RIVER CITY FUNDING, LLC</u>	Phone # <u>301 509 0395</u>
	Address <u>3721 REEDSLANDING CIRCLE, MIDLOTHIAN 23111</u>	Email <u>greg.louis@gmail.com</u>
APPLICANT INFORMATION	Applicant/Contact <u>Douglas M Harley</u>	
	Address <u>1410 WEST MONMOUTH COURT HENRICO VA 23238</u>	Email <u>smharley446@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/GOA <u>CU-2021-12-App 21</u>
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>Existing Structure</u> Planning & Zoning Officer: <u>David Lloyd</u> Date: <u>2/4/22</u>			

CONTRACTOR INFORMATION	Contractor <u>URBAN LAND SOLUTIONS, LLC</u>		Phone <u>804 221 0629</u>
	Address <u>1410 WEST MONMOUTH COURT HENRICO VA 23238</u>		Email <u>smharley446@gmail.com</u>
	Contractor License Number <u>2705171620</u>	Type <u>C</u>	Expiration <u>5 31 2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Change of use from detached accessory w/ unfinished basement to mother-in-law cottage. INSTALL 4 CABINETS WITH A FRIDGE, DW STOVE + SINK (SFD)</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>∅</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>1</u>	# of Bedrooms <u>1</u>	# of floors <u>1</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>550</u>	Unfinished Sq. Ft. <u>550</u>	Total Sq. Ft. <u>1100</u>	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>30-</u>
Value of Work	<u>\$ 3100 -</u>	State Levy Fee	\$ <u>.60</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>50-</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>80.60</u>
Signature of Applicant: <u>[Signature]</u>		Date: <u>1/27/2022</u>	



BUILDING PERMIT APPLICATION

Application Date: 2/2/2022

Permit Number: BP-2022-00134

GPIN/Tax Map: 0133-45-1759/67-23-B-23-0

Issued: 2-10-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 23 Mystic Road Richmond, VA 23238	
	Owner Sterling Wong	Phone # 804-502-6188
	Address 23 Mystic Road	Email surewone8@gmail.com
APPLICANT INFORMATION	Applicant/Contact David Copado - Tiger C Construction	
	Address 4625 Treely Road Chester, VA 23831	Phone # 804-638-1646 Email tiger1@tigercon.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lower Tuckahoe</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change in footprint/use.</u> Planning & Zoning Officer <u>David Floyd</u> Date <u>2/8/22</u>			

CONTRACTOR INFORMATION	Contractor Tiger C Construction LLC		Phone 804-431-5511
	Address 4625 Treely Road Chester, VA 23831		Email tiger1@tigercon.com
	Contractor License Number 2705162557	Type RBC - Class A	Expiration 12/31/2022

DESCRIPTION OF WORK	Scope of Work: 144' of drain tile with sump pump in crawlspace				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER <u>Public/Private</u>	WATER <u>Public/Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work **\$6,930.00**

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 1-26-2022

Application Fee	\$ <u>43.19</u>
State Levy Fee	\$ <u>.86</u>
Zoning Fee	\$ <u>25-</u>
RLD	\$
SWP	\$
Total	\$ <u>69.05</u>

received 1-28-22

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: <u>2-2-22</u>
	Permit Number: <u>BP-2022-00127</u>
	GPIN/Tax Map: <u>6814-57-0323/1-1-0-13-0</u>
	Issued: <u>2-10-22</u>
<p>This application is <u>not</u> authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.</p>	

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>5735 Broad St. 23084</u>	Phone # <u>804 814-8735</u>
	Owner <u>Lauren Barth</u>	Email <u>mike@abetterdeck.com</u>
	Address <u>5735 Broad St. 23084</u>	Phone # <u>deck.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Mike Brockman</u>	Phone # <u>deck.com</u>
	Address <u>19214 Holly Ct. W. VA 23146</u>	Email <u>deck.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>100</u>	Center Line Setback <u>ROW</u>	Rear Setback <u>35 p/L</u>	CUP/Variance/COA <u>A1</u>
	Side Setback <u>20 p/L</u>	Side <u>20 p/L</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>Anda Barnes</u> Date: <u>2-7-2022</u>			

CONTRACTOR INFORMATION	Contractor <u>Mike Brockman</u>	Phone <u>804 814-8735</u>
	Address <u>19214 Holly Ct. W. VA 23146</u>	Email <u>mike@abetterdeck.com</u>
	Contractor License Number <u>2705008763</u>	Type <u>B</u>

DESCRIPTION OF WORK	Scope of Work: <u>Build 344 sq. ft deck</u>				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes/No <u>No</u>	Finished Sq. Ft.	Unfinished Sq. Ft. <u>344</u>	Total Sq. Ft.	

Building Only - Excludes All Trades Permits Value of Work <u>\$25,148.00</u>		Application Fee \$ <u>125.25</u> State Levy Fee \$ <u>2.51</u> Septic/Well Fee \$ _____ Zoning Fee \$ <u>25.00</u> RLD \$ _____ SWP \$ _____ Total \$ <u>152.76</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Mike Brockman</u> Date: <u>1/28/2022</u>		



BUILDING PERMIT APPLICATION

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Application Date: 1/5/2022

Permit Number: **BP-2022-00097**

GPIN/Tax Map: **6777-92-5064 / 44-1-0-220**

Issued: **2-11-22**

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

Site Address
1918 Sheppardtown Road, Crozier, VA 23039

OWNER INFORMATION
Owner: **Joe Carpenter** Phone #: **804-297-5861**

Address: **1918 Sheppardtown Road, Crozier, VA 23039** Email: **joe.carpenter@hourigan.group**

APPLICANT INFORMATION
Applicant/Contact: **Leanne Hill/Virginia Barn Company, LLC** Phone #: **434-315-3002**

Address: **4490 S James Madison Hwy., Farmville, VA 23901** Email: **hillbrothersvabarn@gmail.com**

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision: N/A	Proffer: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount: _____	Date Paid: _____
	Front Setback: 75' from PL Row	Center Line Setback: 100'	Rear Setback: 5'	CUP/Variance/COA: _____
	Side Setback: 5'	Side Setback: 5'	Flood Zone: _____	

APPROVED REJECTED COMMENTS: _____
Planning & Zoning Officer: **David Floyd** Date: **1/27/22**

CONTRACTOR INFORMATION
Contractor: **HillBrothers Construction DBA Virginia Barn Company, LLC** Phone: **434-315-3002**

Address: **4490 S James Madison Hwy., Farmville VA 23901** Email: **hillbrothersvabarn@gmail.com**

Contractor License Number: **2705125448** Type: **Class A CBC/RBC** Expiration: **10/21/2022**

DESCRIPTION OF WORK
Scope of Work: **New construction of 30x60x14 pole framed storage barn with 12x60 enclosed lean to and 12x60 open lean to**

Proposed Use: Residential / A-2	Current Use: Residential/A-2	Environmental Impacts (stream crossing, wetlands, amt land disturbed): 2600 sq ft RDL04236 exp. 5/23/2022		
SEWER: Public/Private	WATER: Public/Private	# of Bathrooms: 0	# of Bedrooms: 0	# of floors: 1
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
		2520 sq ft	2520	

Building Only - Excludes All Trades Permits

Value of Work: 112,227.00	Application Fee: \$517.02
	State Levy Fee: \$10.34
	Zoning Fee: \$25-
	RLD: \$
	SWP: \$
	Total: \$552.36

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: **Leanne Hill** Date: **1/10/2022**



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 1-10-2022
 Permit Number: BP-2022-00030
 GPIN/Tax Map: 7725-33-0619/58-32-3-A-0
 Issued: 2-11-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 15010 Capital One Drive, Richmond, VA 23238		
	Owner Capital One	Phone # 804-592-7934	
	Address 15000 Capital One Drive, Richmond, VA 23238	Email chris.ewing@capitalone.com	
APPLICANT INFORMATION	Applicant/Contact Canterbury Enterprises, LLC		Phone # 804-385-5921
	Address 501 Commerce Road, Richmond, VA 23224		Email kgiambra@cbury.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>West Creek Bus.</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>20' from PD</u>	Center Line Setback	Rear Setback <u>5'</u>	CUP/Variance/COA
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>David Boyd</u> Date: <u>1/19/22</u>			

CONTRACTOR INFORMATION	Contractor Canterbury Enterprises, LLC		Phone 804-530-2109	
	Address 501 Commerce Road, Richmond, VA 23224		Email kgiambra@cbury.net	
	Contractor License Number 2705091632	Type Building - A	Expiration 1/31/23	

DESCRIPTION OF WORK	Scope of Work: Install new outdoor pavilion at existing sand volleyball court. Includes in pier footings, concrete slab, and pavilion structure per included plans.				
	Proposed Use Outdoor pavilion, gathering	Current Use Volleyball	Environmental Impacts (stream crossing, wetlands, amt land disturbed) No impact		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>1275.00</u>
Value of Work	\$170,000.00	State Levy Fee	\$ <u>25.50</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Jake Parsons</u> Date: <u>January 4, 2022</u>		Zoning Fee	\$ <u>50.00</u>
		RLD	\$
		SWP	\$
		Total	\$ <u>1350.50</u>



BUILDING PERMIT APPLICATION

Application Date: 08/23/2021- 9-9-2021

Permit Number: BP-2021-01158
277208-0006 410-1-0-10-1-TW

GPIN/Tax Map: 7707-98-9097-46-41-0-3-0
7707-98-8002

Issued: 2-11-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 565 <u>570</u> Church Hill Rd Manakin Sabot, VA 23103	Phone #
	Owner American Towers LLC	
	Address 10 Presidential Way, Woburn, MA 01801	Email
APPLICANT INFORMATION	Applicant/Contact Dish Wireless (c/o NB+C, Alexandra Bull)	Phone # 443.605.6312
	Address 6095 Marshalee Drive Suite 300 Elkridge, MD 21075	Email abull@nbcllc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA <u>CU-2005-7</u>
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing footprint</u>			
	Planning & Zoning Officer: <u>Daniel Floyd</u>		Date: <u>10/4/21</u>	

CONTRACTOR INFORMATION	Contractor <u>Squan Constructors</u>	Phone
	Address <u>TBD - 193 Veterans Blvd</u>	Email
	Contractor License Number <u>2705145665</u>	Type <u>Contractor</u>

DESCRIPTION OF WORK	Scope of Work: Install 3 panel antennas on existing tower. Install ground equipment on proposed equipment platform.				
	Proposed Use <u>Utility</u>	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>25,000</u>
---------------	---------------

Application Fee	\$ <u>185.00</u> <u>187.50</u>
State Levy Fee	\$ <u>3.75</u>
Zoning Fee	\$ <u>200.00</u>
RLD	\$
SWP	\$
Total	\$ <u>391.25</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: _____



BUILDING PERMIT APPLICATION

Application Date: 9-9-2024

Permit Number: BP-2021-01157

GPIN/Tax Map: 738-3-9741

Issued: 2-11-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Residential

Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 6011 Pouncey Tract Road Rockville, VA 23146	
	Owner GL Howard INC	Phone #
	Address	Email
APPLICANT INFORMATION	Applicant/Contact Dish Wireless (c/o NB+C, Alexandra Bull)	Phone # 443.605.6312
	Address 6095 Marshalee Drive Suite 300 Elkridge, MD 21075	Email abull@nbcllc.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <i>No change to existing footprint</i> MB Planning & Zoning Officer: <i>[Signature]</i> Date: <i>10/4/21</i>			

CONTRACTOR INFORMATION	Contractor		Phone
	Address TBD Squan Construction Services LLC		Email
	Contractor License Number 2705145665	Type Contractor	Expiration 3-31-22

DESCRIPTION OF WORK	Scope of Work: Install 3 panel antennas on existing tower. Install ground equipment on proposed equipment platform.				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	25,000
---------------	---------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date _____

Application Fee	\$ <u>187.50</u>
State Levy Fee	\$ <u>3.75</u>
Zoning Fee	\$ <u>200.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>391.25</u>

2-2-22



BUILDING PERMIT APPLICATION

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Application Date: 2-7-2022

Permit Number: BP-2022-00155

GPIN/Tax Map: 6757-91-7810 / 42-40-0-9-0

Issued: 2-15-22

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 3013 Swann's Inn Cres., Goochland, VA 23063	
	Owner Swann's Inn, LLC	Phone # 804-564-9097
APPLICANT INFORMATION	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com
	Applicant/Contact Travis W. Johnson	Phone # same
	Address same	Email same

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Swann's Inn</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' front/row</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA R3
	Side Setback <u>5'</u>	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Survey locate setbacks.</u>		
Planning & Zoning Officer: <u>[Signature]</u>		Date: <u>2/9/22</u>		

CONTRACTOR INFORMATION	Contractor Legacy Homes, LLC	Phone 804-564-9097
	Address 207 Echo Meadows Rd, Rockville, VA 23146	Email legacyhomes09@aol.com
	Contractor License Number 2705052698	Type Class A

DESCRIPTION OF WORK	Scope of Work: New construction - Detached 16x22 garage				
	Proposed Use garage	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 1,000		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / (No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 352	

Building Only - Excludes All Trades Permits

Value of Work	\$25,000
---------------	-----------------

Application Fee	\$ <u>124.50</u>
State Levy Fee	\$ <u>2.49</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>151.99</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 02/02/2022

17-37-22

 <p>BUILDING PERMIT APPLICATION</p> <p>Department of Building Inspection P.O. Box 119 Goochland, VA 23063 (804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay</p> <p><input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial</p>	Application Date: 1-28-22
	Permit Number: <u>BP-2022-00157</u>
	GPIN/Tax Map: <u>7123-18-12891</u> 63-7-0-C-2
	Issued: <u>2-15-22</u>
	This application is <u>not</u> authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 12887 River	
	Owner Thornton James D Thornton Pamela S	Phone # 804-986-4858
	Address 12887 River Road	Email

APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE	Phone # 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email JSALVATORE@JESWORK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint / Use.</u>			
	Planning & Zoning Officer <u>Dennis Floyd</u>		Date <u>2/9/22</u>	

CONTRACTOR INFORMATION	Contractor JES CONST	Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email JSALVATORE@JESWORK.COM
	Contractor License Number <u>2705-06-8655</u>	Type <u>A</u>

DESCRIPTION OF WORK	Scope of Work: dehumidifier, 3020 crawl seal liner, for encapsulation				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/>	<input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>	# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only – Excludes All Trades Permits		Application Fee \$ <u>80.66</u>
Value of Work	15,257.14	State Levy Fee \$ <u>1.61</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Jeannie Salvatore</u> Date <u>1-28-22</u>		Septic/Well Fee \$ _____
		Zoning Fee \$ <u>25.00</u>
		RLD \$ _____
		SWP \$ _____
		Total \$ <u>107.27</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 2-1-22

Permit Number: BP-2022-0047

GPIN/Tax Map: 7733-16-2043/67-10-0-23-0

Issued: 2-16-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>4 Roads End Ln Richmond VA 23238</u>	
	Owner <u>Christopher Herron</u>	Phone # <u>214-810-2016</u>
	Address <u>4 Roads End Ln Richmond VA 23238</u>	Email <u>herroncm@gmail.com</u>

APPLICANT INFORMATION	Applicant/Contact <u>Christopher Herron (Owner)</u>	Phone # <u>214-810-2016</u>
	Address <u>4 Roads End Ln Richmond VA 23238</u>	Email <u>herroncm@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Lower Jackson</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from Pylon</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone	<u>R1</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>2/9/22</u>			

CONTRACTOR INFORMATION	Contractor <u>None Owner</u>	Phone
	Address	Email
	Contractor License Number	Type

DESCRIPTION OF WORK	Scope of Work: <u>Roughly 30'X20' Deck attached to the back of the house.</u>				
	Proposed Use	Current Use	Environmental impacts (stream crossing, wetlands, amt land disturbed) <u>none</u>		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes (No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
			<u>600</u>	<u>600</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$15,000</u>
---------------	-----------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant [Signature] Date 2-1-22

Application Fee	\$ <u>79.50</u>
State Levy Fee	\$ <u>1.59</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>106.09</u>

2-7-2022



BUILDING PERMIT APPLICATION

Application Date: January 31st, 2022

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Permit Number: BP-2022-00168

GPIN/Tax Map: 6777-45-6055 / 43-42-E-1-0

Issued: 2-16-2022

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1736 Fishers Pond Drive Maidens, VA 23102	
	Owner Gupta Christopher Kumar Gupta Kristin Beale	Phone # (804) 441-0216
	Address 1736 Fishers Pond Drive Maidens, VA 23102	Email guptack1019@gmail.com

APPLICANT INFORMATION	Applicant/Contact Henry Keith (Sigora Solar)		Phone # (434) 996-6141
	Address 490 Westfield Road STE A Charlottesville, VA 22901		Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze Hill</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to existing property use</u>			
	Planning & Zoning Officer: <u>David Floyd</u> Date: <u>2/10/22</u>			

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone (434) 996-6141
	Address 490 Westfield Road STE A Charlottesville, VA 22901		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A	Expiration 7/31/22

DESCRIPTION OF WORK	Scope of Work: Install of a flush roof mounted solar photo-voltaic array. System Capacity: 13.600 kWp DC				
	Proposed Use SFD	Current Use SFD	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>38.31</u>	
Value of Work \$5,848.00		State Levy Fee \$ <u>.77</u>	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant <u>Henry Keith</u> Date <u>1/31/22</u>		Septic/Well Fee \$	
		Zoning Fee \$ <u>25.00</u>	
		RLD \$	
		SWP \$	
		Total \$ <u>64.08</u>	



BUILDING PERMIT APPLICATION

Application Date: January 28th, 2022

Permit Number: **BP-2022-00145**

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

GPIN/Tax Map: 6833-70-8900 / **U-6-D-1-D**

Issued: **2-16-2022**

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION
Site Address
4640 Old Fredericksburg Road Mineral, VA 23117

Owner: **Russell Gene P Russell Nastassya** Phone #: **(804) 698-0216**

Address: **4640 Old Fredericksburg Road Mineral, VA 23117** Email: **permitting@sigorasolar.com**

APPLICANT INFORMATION
Applicant/Contact: **Henry Keith (Sigora Solar)** Phone #: **(434) 996-6141**

Address: **490 Westfield Road STE A Charlottesville, VA 22901** Email: **permitting@sigorasolar.com**

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	<i>Hallonsville Est.</i>			
	Front Setback <i>75' from PLYROW</i>	Center Line Setback <i>100'</i>	Rear Setback <i>5'</i>	CUP/Variance/COA
	Side Setback <i>LT Side 35'</i>	Side Setback <i>RT Side 5'</i>	Flood Zone	<i>A1</i>
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:				
Planning & Zoning Officer: <i>David Floyd</i> Date: <i>2/19/22</i>				

CONTRACTOR INFORMATION
Contractor: **Sigora Solar LLC** Phone: **(434) 996-6141**

Address: **490 Westfield Road STE A Charlottesville, VA 22901** Email: **permitting@sigorasolar.com**

Contractor License Number: **2705141338** Type: **A** Expiration: **1/28/2022**

DESCRIPTION OF WORK
Scope of Work:
Install of ground mounted solar array. System Capacity: 19.760 kWp DC

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SFD	SFD	# of Bathrooms	# of Bedrooms	# of floors
SEWER Public/Private	WATER Public/Private	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.
Will a foundation be installed within 20 ft. of any septic system components? Yes / No				

Building Only - Excludes All Trades Permits

Value of Work: **\$9,532.80**

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: *Henry Keith* Date: **01/28/2022**

Application Fee	\$ 54.90
State Levy Fee	\$ 1.10
Septic/Well Fee	\$
Zoning Fee	\$ 25-
RLD	\$
SWP	\$
Total	\$ 81-



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 2/10/22

Permit Number: BP-2022-00180

GPIN/Tax Map: 2096-0001
0806-68-0009/44-1-0-68-A

Issued: 2-18-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1700 Cardwell Road, Crozier, VA 23039</u>		
	Owner <u>Brett Carreras / Goochland Convention Center, LLC</u>	Phone # <u>(804) 303-0455</u>	
APPLICANT INFORMATION	Address <u>402 N. Allen Ave., Richmond, VA 23220</u>		
	Applicant/Contact <u>Clyde Toms / Dominion Preservation Co., LLC</u>	Email <u>brett.carreras@gmail.com</u>	
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>2150 Westmoreland St., Richmond VA 23230</u>		Email <u>cllyde.toms@dominionpreservation.com</u>
	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____
	Front Setback _____	Center Line Setback _____	Rear Setback _____
	Side Setback _____	Side Setback _____	Flood Zone _____
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>		COMMENTS: <u>No change to footprint/use</u>	
Planning & Zoning Officer <u>David Boyd</u>		Date <u>2/11/22</u>	

CONTRACTOR INFORMATION	Contractor <u>Dominion Preservation Co., LLC</u>		Phone <u>(804) 564-4323</u>
	Address <u>2150 Westmoreland St., Richmond, VA 23230</u>		Email <u>cllyde.toms@dominionpreservation.com</u>
	Contractor License Number <u>2705077267</u>	Type <u>Class A</u>	Expiration <u>6/30/2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Structural repairs to roof trusses, LVLs & termite/water damaged roof sheathing, wall sheathing & studs. Replace 60 sheets of roof sheathing.</u>		
	Proposed Use <u>Garage & gathering space</u>	Current Use <u>Commercial</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>None</u>
	SEWER Public/Private <u>Private</u>	WATER Public/Private <u>Private</u>	# of Bathrooms <u>2</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <u>No</u>	Finished Sq. Ft. <u>3000</u>	Unfinished Sq. Ft. <u>456</u>
		# of Bedrooms <u>1</u>	# of floors <u>1</u>
		Total Sq. Ft. <u>3456</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>\$20,000</u>	Application Fee <u>\$150-</u>
	State Levy Fee <u>\$3-</u>
	Zoning Fee <u>\$50-</u>
	RLD <u>\$-</u>
	SWP <u>\$-</u>
	Total <u>\$203-</u>

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Clyde H. Toms Date 2/10/2022



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Application Date: 1-26-2022

Permit Number: **BP-2022-DD141**

GPIN/Tax Map: **0114-04-0234/02-2-B-11-D**

Issued: **2-17-2022**

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

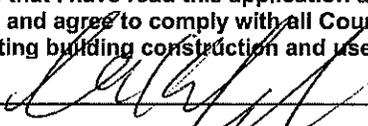
This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 107 Willway Dr, Manakin-Sabot, VA 23103	
	Owner Sally Slaughter	Phone # (804) 339-4082
	Address 107 Willway Dr, Manakin-Sabot, VA 23103	Email
APPLICANT INFORMATION	Applicant/Contact Mark Keffer/Jodi Irwin	Phone # 804-318-5002
	Address 13509 E Boundary Rd Suite G, Midlothian, VA, 23112	Email Info@Kefficient.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Manakin Farms	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: * No damage to footprints / use Planning & Zoning Officer: David Boyd Date: 2/8/22			

CONTRACTOR INFORMATION	Contractor Kefficient LLC	Phone 804-318-5002
	Address 13509 E Boundary Rd Suite G, Midlothian, VA, 23112	Email Info@Kefficient.com
	Contractor License Number 2705163415	Type Class A Expiration 02-28-2023

DESCRIPTION OF WORK	Scope of Work: Crawl Space Encapsulation 2018 IRC/VRC				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft. 1266	

Building Only - Excludes All Trades Permits		Application Fee \$ 12.98 State Levy Fee \$ 1.46 Zoning Fee \$ 25- RLD \$ _____ SWP \$ _____ Total \$ 99.44
Value of Work	\$ 13,550.49	
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		
Signature of Applicant	Date 01-26-2022	
		



BUILDING PERMIT APPLICATION

Application Date: 2-8-22

Permit Number: BP-2022-00172

GPIN/Tax Map: 7715-81-3701 / 63-1-0-138-A

Issued: 2-16-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 903 Sunset Drive	
	Owner Haslup David N Moore Sarah Tyler	Phone #
	Address 903 Sunset Drive	Email

APPLICANT INFORMATION	Applicant/Contact JEANNIE SALVATORE	Phone # 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email JSALVATORE@JESWORK.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>No change to footprint/Use.</u> AJ Planning & Zoning Officer: <u>[Signature]</u> Date: <u>2/16/22</u>			

CONTRACTOR INFORMATION	Contractor JES CONST	Phone 804-621-7718
	Address 2410 SOUTHLAND DR CHESTER VA 23831	Email JSALVATORE@JESWORK.COM
	Contractor License Number 2705-06-8655	Type A

DESCRIPTION OF WORK	Scope of Work: 1107 crawl seal liner, dehumidifier for encapsulation				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	<input checked="" type="checkbox"/> SEWER Public/Private <input type="checkbox"/> <input checked="" type="checkbox"/> WATER Public/Private <input type="checkbox"/>		# of Bathrooms	# of Bedrooms	# of floors
	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.		

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>61.51</u>
Value of Work	11,002.36	State Levy Fee	\$ <u>1.23</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>Jeannie Salvatore</u> Date: _____		Septic/Well Fee	\$ <u>5</u>
		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>87.74</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 2-3-22 1-13-22
 Permit Number: BP-2022-00140
 GPIN/Tax Map: 6777-55-8256 / 43.40.C-230
 Issued: 2-18-2022
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 2102 Jockey Ridge Rd	
	Owner Jane Levin	Phone # 804-477-4077
	Address 12433 Bristol Ln, Glen Allen VA 23059	Email jjjjjlevin@gmail.com
APPLICANT INFORMATION	Applicant/Contact William Becker - Billy's Pool Service	
	Address 13372 Greenwood Church Rd, Ashland VA 23005	Phone # 804-761-7904
		Email poolsbybilly@yahoo.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Breeze H. 11</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount —	Date Paid —
	Front Setback <u>40' from PL Road</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA —
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone <u>X</u>	<u>RP</u>
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer <u>Daniel Floyd</u> Date <u>2/18/22</u>			

CONTRACTOR INFORMATION	Contractor Billy's Pool Service LLC		Phone 804-761-7904
	Address 13372 Greenwood Church Rd, Ashland VA 23005		Email poolsbybilly@yahoo.com
	Contractor License Number 2705136588	Type Class B - POL	Expiration 9-30-23

DESCRIPTION OF WORK	Scope of Work: install inground fiberglass pool 35'x15'8" (with auto cover as barrier) (Whitsunday 2 by Barrier Reef)				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/(No)	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	
				560	

Building Only - Excludes All Trades Permits		Application Fee	\$ <u>145.00</u>
Value of Work	\$24,000	State Levy Fee	\$ <u>2.40</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee	\$ <u>25.00</u>
		RLD	\$ _____
		SWP	\$ _____
		Total	\$ <u>147.40</u>
		Signature of Applicant	<u>William Becker</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 8/20/2021

Permit Number: BP-2021-01038

GPIN/Tax Map: 7716-39-1540 / 47-1-0-14-8

Issued: 2-23-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 347 Broad Street Road Manakin-Sabot, VA 23103	
	Owner TRU North Bible Church	Phone # 804-247-2756
	Address 17046 Goshen Road Montpelier, VA 23192	Email Pastor.tnbc@gmail.com

APPLICANT INFORMATION	Applicant/Contact James (Bobby) Bailey Jr. - Pastor	Phone # 804-247-2756
	Address 17046 Goshen Road Montpelier, VA 23192	Email Pastor.tnbc@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision N/A	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback 100' from R/R SW	Center Line Setback 125'	Rear Setback 35'	CUP/Variance/COA CU-2009-7
	Side Setback Right Side 35' from R/R	Side Setback 20'	Flood Zone C	A2
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
	Planning & Zoning Officer David Floyd		Date 9/17/21	

CONTRACTOR INFORMATION	Contractor Fettersville Sales	Phone 717-354-7561
	Address 245 Fettersville Rd. East Earl, PA 17519	Email Info@fettersvillesales.com
	Contractor License Number 2705114185	Type Class "A"

DESCRIPTION OF WORK	Scope of Work: PEMB (pole), 24 & 26 ga steel, framed, drywall, tile, carpet, 2000SF assembly, 10' ceiling, contemporary facial exterior, 20x20 do/pu carport, concrete foundation,				
	Proposed Use Church	Current Use N/A	Environmental Impacts (stream crossing, wetlands, amt land disturbed) 2.04 acres		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 2	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes <input checked="" type="checkbox"/> No	Finished Sq. Ft. 4500	Unfinished Sq. Ft. 4500	Total Sq. Ft. 4500	

Building Only - Excludes All Trades Permits		Application Fee \$ 4927.50
Value of Work \$192,000.00		State Levy Fee \$ 98.55
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant [Signature] Date 8/20/21		Zoning Fee \$ 100.00
		RLD \$ _____
		SWP \$ _____
		Total \$ 5126.05



BUILDING PERMIT APPLICATION

Application Date: 1/28/2022
 Permit Number: **BP-2022-00120**
 GPIN/Tax Map: **6779-61-6132/32-10-2-11-0**
 Issued: **2-23-2022**
 This application is *not* authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 2482 Three Oaks Lane, Maidens, VA 23102	
	Owner Arlen and Joanna Penfield	Phone # 360-485-3019
APPLICANT INFORMATION	Address 2482 Three Oaks Lane, Maidens, VA 23102	Email arlenpenfield@gmail.com
	Applicant/Contact Arlen Penfield	Phone # 360-485-3019
	Address 2482 Three Oaks Lane, Maidens, VA 23102	Email arlenpenfield@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Three Oaks	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback 55' from PY Row	Center Line Setback	Rear Setback 5'	CUP/Variance/COA
	Side Setback 5'	Side Setback 5'	Flood Zone	A2
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: David Boyd Date: 2/4/22			

CONTRACTOR INFORMATION	Contractor JDM Pools and Construction-Shaun Barrett	Phone 540-223-0540
	Address 13702 Cross Country Rd, Mineral, VA 23117	Email jdmpoolsandcons@aol.com
	Contractor License Number 2705133372	Type HIC POL RFC
		Expiration 03/31/2022

DESCRIPTION OF WORK	Scope of Work: Installing in-ground pool			
	Proposed Use swimming pool	Current Use yard	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A - None	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms N/A	# of Bedrooms N/A
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. N/A	Unfinished Sq. Ft. 640	# of floors N/A
			Total Sq. Ft. 640	

Building Only - Excludes All Trades Permits

Value of Work	\$41,150	Application Fee	\$197.18
		State Levy Fee	\$3.94
		Zoning Fee	\$25-
		RLD	\$
		SWP	\$
		Total	\$226.12

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: **[Signature]** Date: **1/28/2022**



BUILDING PERMIT APPLICATION

Application Date: February, 1st 2022 2-7-2022

Permit Number: BP-2022-00167

GPIN/Tax Map: 7705-27-0571 / 57-29-0-64-0

Issued: 2-23-2022

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 1271 Flat Rock Crossing Manakin Sabot, VA 23103	
	Owner Bogese Bryan R Bogese Kendall M	Phone # (804) 986-3688
	Address 1271 Flat Rock Crossing Manakin Sabot, VA 23103	Email bogese72@gmail.com
APPLICANT INFORMATION	Applicant/Contact Henry Keith (Sigora Solar LLC)	
	Address 490 Westfield Road STE A Charlottes	Phone # (434) 996-6141
		Email permitting@sigorasolar.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Logans Woods</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/GOA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>* No change to front print/lure. RER</u> Planning & Zoning Officer: <u>David Floyd</u> Date: <u>2/10/22</u>			

CONTRACTOR INFORMATION	Contractor Sigora Solar LLC		Phone (434) 996-6141
	Address 490 Westfield Road STE A Charlottesville, VA 22901		Email permitting@sigorasolar.com
	Contractor License Number 2705141338	Type A	Expiration 7/31/22

DESCRIPTION OF WORK	Scope of Work: Install of a flush roof mounted solar photo-voltaic array. System Capacity: 5.200 kWp DC				
	Proposed Use sfd	Current Use sfd	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	1,636.40
---------------	-----------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Henry Keith Date: 2/1/22

Application Fee	\$ <u>30.00</u>
State Levy Fee	\$ <u>.60</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>55.60</u>



BUILDING PERMIT APPLICATION

Application Date: **1-31-22**
 Permit Number: **BP-2022-00114**
 GPIN/Tax Map: **60107-09-3012/42-1-0-122-0**
 Issued: **2-24-22**
 This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 2730 Fairground Rd, Goochland, VA 23063	
	Owner John Palamar	Phone # 919-669-0581
	Address PO Box 32267 Raleigh, NC 27622	Email john@chasedevelopment.com
APPLICANT INFORMATION	Applicant/Contact Ibrahim Alhumaidi	
	Address 10846 Houser DR Fredericksburg, VA 22407	Phone # 734-219-2245 Email thv.ibrahim@gmail.com

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision Commons Shopping Ctr	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: All interior work.			
	Planning & Zoning Officer: [Signature] Date: 1/31/22			

CONTRACTOR INFORMATION	Contractor Q CONSTRUCTION INC		Phone 7032033256
	Address 4820 BLACKCLICK RD ANNADALE VA		Email qcontractor@gmail.com
	Contractor License Number 2705138724	Type CBC/CIC/ELE/HIC/RBC	Expiration 02/28/2023

DESCRIPTION OF WORK	Scope of Work: Tenant upfit For Tobacco Hut				
	Proposed Use Tobacco Shop	Current Use Frozen Yogurt	Environmental Impacts (stream crossing, wetlands, amt land disturbed) NA		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms NA	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. 1600	Unfinished Sq. Ft. NA	Total Sq. Ft. 1600	

Building Only - Excludes All Trades Permits

Value of Work	\$45,000 15,000 2-18-22
---------------	--------------------------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: **[Signature]** Date: **1/27/2022**

Application Fee	\$337.50
State Levy Fee	\$6.75
Zoning Fee	\$100-
RLD	\$-
SWP	\$-
Total	\$444.25



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Application Date: 2/4/2022

Permit Number: BP-2022-00159

GPIN/Tax Map: 7704-94-3875/62-40-0-25

Issued: 2-24-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 701 TAYLORS HILL CT	
	Owner JAY GOOD	Phone # 804-337-4982
	Address 701 TAYLORS HILL CT	Email

APPLICANT INFORMATION	Applicant/Contact JUDAH MURPHY	
	Address 6408 MALLORY DR.	Phone # 804-285-4239
		Email JUDAHMURPHY326@GMAIL.COM

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Paikes at Manak's Woods</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>30' from Pavement</u>	Center Line Setback	Rear Setback <u>50' B/S</u>	CUP/Variance/COA
	Side Setback <u>17.5' to 20' B/S</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>RPAD</u>			

CONTRACTOR INFORMATION	Contractor ADD A DECK, INC.		Phone 804-285-4239
	Address 6408 MALLORY DR.		Email ADMIN@ADDADECK.COM
	Contractor License Number 2701-033201A	Type CLASS A	Expiration 11/30/2022
	Planning & Zoning Officer <u>David Ford</u> Date <u>2/9/22</u>		

DESCRIPTION OF WORK	Scope of Work: DEMO AN EXISTING 18'X14' DECK AND REBUILD NEW COMPOSITE DECK OF THE SAME SIZE AND FOOTPRINT.			
	Proposed Use DECK	Current Use DECK	Environmental Impacts (stream crossing, wetlands, amt land disturbed) N/A	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 0	# of Bedrooms 0
	Finished Sq. Ft. 0	Unfinished Sq. Ft. 252	Total Sq. Ft. 252	

Building Only - Excludes All Trades Permits

Value of Work	18000
---------------	--------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant Judah Murphy Date 2/4/2022

Application Fee	\$ <u>93.00</u>
State Levy Fee	\$ <u>1.86</u>
Septic/Well Fee	\$
Zoning Fee	\$ <u>25.00</u>
RLD	\$
SWP	\$
Total	\$ <u>119.86</u>

dlloyd@goochlandva.us
 1salyer@goochlandva.us



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 2-8-22

Permit Number: PD-2022-00166

GPIN/Tax Map: 0797-02-0404 / 45-15-0-2-0

Issued: 2-27-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION
 Site Address: 1155 Woods Edge Lane, Manakin Sabot

Owner: Bobby & Lisa Smith
 Phone #: 571.233.0313

Address: 1155 Woods Edge Lane, Manakin Sabot
 Email: blsmith64@verizon.net

APPLICANT INFORMATION
 Applicant/Contact: Bobby Smith
 Phone #: 571.233.0313

Address: 1155 Woods Edge Lane
 Email: blsmith64@verizon.net

TO BE COMPLETED BY ZONING DEPARTMENT
 Subdivision: Woods Edge Proffer: Yes No Amount: _____ Date Paid: _____

Front Setback: _____ Center Line Setback: _____ Rear Setback: _____ CLUP/Variance/COA: _____

Side Setback: _____ Side Setback: _____ Flood Zone: _____

APPROVED REJECTED COMMENTS: No change to footprint
 Planning & Zoning Officer: [Signature] Date: 2/19/22

CONTRACTOR INFORMATION
 Contractor: Bobby Smith
 Phone: 571.233.0313

Address: _____
 Email: _____

Contractor License Number: _____ Type: _____ Expiration: _____

DESCRIPTION OF WORK
 Scope of Work: change of use from spd to accessory structure

Proposed Use: _____ Current Use: _____ Environmental Impacts (stream crossing, wetlands, amt land disturbed): _____

SEWER: Public/Private WATER: Public/Private # of Bathrooms: _____ # of Bedrooms: _____ # of floors: _____

Finished Sq. Ft.: _____ Unfinished Sq. Ft.: _____ Total Sq. Ft.: _____

Building Only - Excludes All Trades Permits
 Value of Work: \$ 100

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.
 Signature of Applicant: Bobby Smith Date: 2/7/22

Application Fee	
State Levy Fee	
Septic/Well Fee	
Zoning Fee	
PLD	
SWP	
Total	

30.60
 50.00
 \$80.60

REVIEWED BY: [Signature]

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

Lisa Smith of (address) 1155 Woods Edge Lane, Manakin Neck affirm that I am the owner of a certain tract of parcel

of land located at 1155 Woods Edge Lane and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Lisa Smith Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE _____

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000 Add 2% State Levy to fee

Other Fees that may be applicable RLD \$100.00 for Residential disturbing over 10,000 square feet Stormwater \$200 for Residential in certain subdivisions Septic & well processing \$40.80 for Commercial & Residential Septic only processing \$25.50 for Commercial & Residential Zoning Commercial \$100.00 Zoning Residential SFD \$50.00 Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE RS # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 0 CODE EDITION 15

FIRE SPRINKLER - FIRE ALARM - MODIFICATION -

APPROVAL MICHAEL BROOKING DATE 2-22-22

Code Official

Revised: 8/31/2020



BUILDING PERMIT APPLICATION

Department of Building Inspection
P.O. Box 119
Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651
TDD 711 VA Relay

Application Date: 1/26/22
Permit Number: BP-2022-00137
GPIN/Tax Map: 7734-40-9796/64-26-0-13.0
Issued: 2.28.2022
This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>325 WICKHAM GLEN DRIVE Richmond VA 23238</u>	
	Owner <u>GEORGE MAHONEY</u>	Phone #
	Address	Email
APPLICANT INFORMATION	Applicant/Contact <u>LANCASTER CUSTOM BUILDER</u>	
	Address	Phone # <u>804-784-9898</u> Email <u>OFFICE@LANCASTERCUSTOMBUILDER.COM</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Wickham Glen</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount	Date Paid
	Front Setback <u>40' from P/R/W</u>	Center Line Setback <u>65'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA <u>R1</u>
	Side Setback <u>15'</u>	Side Setback <u>15'</u>	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: Planning & Zoning Officer: <u>[Signature]</u> Date: <u>2/8/22</u>			

CONTRACTOR INFORMATION	Contractor <u>LANCASTER CUSTOM BUILDER</u>		Phone <u>804-784-9898</u>
	Address <u>PO Box 18372 RICHMOND VA 23226</u>		Email
	Contractor License Number <u>2705155799</u>	Type <u>Class A</u>	Expiration <u>12/31/23</u>

Scope of Work: Add bath + laundry on 2nd floor
ADD/RENOVATION to INCLUDE ELEVATOR
↳ laundry relocate + enlarge laundry room

Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors <u>3</u>
Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft. <u>488</u>	Unfinished Sq. Ft.	Total Sq. Ft. <u>488</u>	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$300,000.00</u>	Application Fee	<u>\$1362.-</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use. Signature of Applicant: <u>[Signature]</u> Date: <u>1/26/22</u>		State Levy Fee	<u>\$27.24</u>
		Zoning Fee	<u>\$25.-</u>
		RLD	<u>\$</u>
		SWP	<u>\$</u>
		Total	<u>\$1814.24</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential

Commercial

Application Date: 6/21-2021

Permit Number: BP-2021-00793

GPIN/Tax Map: 7716-67-0820

Issued: 2-28-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1840 manakin road manakin sabot VA 23103</u>		
	Owner <u>Veronica lower</u>	Phone # <u>804-332-2605</u>	
APPLICANT INFORMATION	Address <u>1840 manakin road manakin sabot</u>		Email
	Applicant/Contact <u>Jesika Cardani</u>		Phone # <u>804-380-9993</u>
TO BE COMPLETED BY ZONING DEPARTMENT	Address <u>1575 Lew Lane Crozier 23039</u>		Email <u>JesikaCardani@gmail</u>
	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount
TO BE COMPLETED BY ZONING DEPARTMENT	Front Setback <u>100' from Hwy</u>	Center Line Setback <u>125'</u>	Rear Setback <u>5'</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone
APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS:			
Planning & Zoning Officer: <u>David Ford</u>		Date: <u>7/6/21</u>	

CONTRACTOR INFORMATION	Contractor <u>Self/Owner</u>		Phone
	Address		Email
Contractor License Number		Type	Expiration

DESCRIPTION OF WORK	Scope of Work: <u>Simple out building 7' x 24' accessory structure for gift shop</u>			
	Proposed Use <u>Gift Shop</u>	Current Use <u>None</u>	Environmental Impacts (stream crossing, wetlands, amt land disturbed) <u>0</u>	
	SEWER Public/Private	WATER Public/Private	# of Bathrooms <u>0</u>	# of Bedrooms <u>0</u>
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? (Yes / No)	Finished Sq. Ft. <u>800</u>	Unfinished Sq. Ft. <u>0</u>	Total Sq. Ft. <u>800 384</u>

Building Only - Excludes All Trades Permits <u>384</u>		Application Fee \$ <u>60.00</u>
Value of Work <u>8,000</u>		State Levy Fee \$ <u>1.20</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ _____
Signature of Applicant <u>J Cardani</u>	Date <u>6-21-21</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>1161.20</u>

LIEN AGENT INFORMATION

Please check one of the following:

I do not wish to designate a mechanic's lien agent and that for the purpose of Section 36-98.01 of the Code of Virginia this building permit shall be a "NONE DESIGNATED" permit.

I hereby request that the following mechanic's lien agent be listed as part of my building permit:

Name: _____ Telephone: _____

Mailing Address: _____

OWNER'S STATEMENT

I Veronica Lowe of (address) 1840 Mandarin Road affirm that I am the owner of a certain tract of parcel of land located at 1840 Mandarin Road and that I have applied for a building permit. I affirm that I am not subject to licensure as a contractor or subcontractor as required by Section 54.1-1111 of the Code of Virginia.

Veronica Lowe Owner's Signature

ASBESTOS CERTIFICATION FOR RENOVATION OR DEMOLITION OF COMMERCIAL STRUCTURES

I CERTIFY THAT THIS STRUCTURE HAS BEEN INSPECTED FOR ASBESTOS AND COMPLIES WITH THE CODE OF VIRGINIA Section 36-99.7 AND THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE SECTION 110.3

OWNER'S SIGNATURE N/A Veronica Lowe

PERMIT FEE SCHEDULE

Residential fee is based on the building value of the job \$0 to \$ 4000 of value... \$ 30.00 + \$ 4.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Commercial fee is based on the building value of the job \$0 to \$ 4000 of value.... \$ 30.00 + \$ 7.50 per portion of \$ 1000 above \$ 4000
Add 2% State Levy to fee

Other Fees that may be applicable
RLD \$100.00 for Residential disturbing over 10,000 square feet
Stormwater \$200 for Residential in certain subdivisions
Septic & well processing \$40.80 for Commercial & Residential
Septic only processing \$25.50 for Commercial & Residential
Zoning Commercial \$100.00
Zoning Residential SFD \$50.00
Zoning all other structures \$ 25.00

OFFICE USE ONLY

USE M # STORIES 1 CONSTRUCTION TYPE VB OCCUPANT LOAD 7 CODE EDITION 2015

FIRE SPRINKLER N FIRE ALARM N MODIFICATION _____

APPROVAL [Signature] DATE 12/8/2021
Code Official



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Application Date: 2-11-2022Permit Number: BP-2022-00192GPIN/Tax Map: 10801-16-16e21e/9-1-0-89-BIssued: 2-28-22This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.
 Residential Commercial

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address 5910 Community House Rd, Columbia, VA. 23038	
	Owner Andrew & Traci Smith	Phone # 804-339-8676
	Address 5910 Community House Rd.	Email drewsmith1213@hotmail.com
APPLICANT INFORMATION	Applicant/Contact Mike Lawhorne	
	Address 119 Boston Hill Rd, Cartersville, Va. 23027	Phone # 804-339-4564 Email mikelawhorne@verizon.net

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>75' from PY RWL</u>	Center Line Setback <u>100'</u>	Rear Setback <u>35'</u>	CUP/Variance/COA _____
	Side Setback <u>20'</u>	Side Setback <u>20'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: _____ Planning & Zoning Officer <u>David Lloyd</u> Date <u>2/15/22</u>			

CONTRACTOR INFORMATION	Contractor Triple L Construction, LLC		Phone 804-339-4564
	Address 119 Boston Hill Rd. Cartersville, VA. 23027		Email mikelawhorne@verizon.net
	Contractor License Number 2705059628	Type A	Expiration 11-30-2022

DESCRIPTION OF WORK	Scope of Work: Build a 544 square foot addition to rear of home. Remove load bearing exterior wall to expand existing space into addition. SUNROOM, POWDER BATH & LAUNDRY ROOM				
	Proposed Use	Current Use Residence	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms 1	# of Bedrooms 0	# of floors 1
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes/No <u>(No)</u>	Finished Sq. Ft. 544	Unfinished Sq. Ft. 0	Total Sq. Ft. 544	

Building Only - Excludes All Trades Permits		Application Fee \$ <u>529.50</u>
Value of Work 115,000.00		State Levy Fee \$ <u>10.59</u>
I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.		Zoning Fee \$ <u>25.00</u>
Signature of Applicant <u>Michael W. R.</u>	Date <u>1-22-22</u>	RLD \$ _____
		SWP \$ _____
		Total \$ <u>565.09</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Residential Commercial

Application Date: 1-20-22

Permit Number: BP-2022-00107

GPIN/Tax Map: 7726-16-8866/58-3-C-6-0

Issued: 2-28-22

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>1574 Birch Rd Manakin Sabot, VA 23103</u>	Phone # <u>804 836 2579</u>
	Owner <u>G. Curry Jones</u>	Email <u>gomelos92@gmail.com</u>
	Address <u>1574 Birch Rd Manakin Sabot VA 23103</u>	Phone # <u>804 836 2579</u>

APPLICANT INFORMATION	Applicant/Contact <u>G. Curry Jones</u>	Phone # <u>804 836 2579</u>
	Address <u>1574 Birch Rd Manakin Sabot VA 23103</u>	Email <u>gomelos92@gmail.com</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>Hickory Haven</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback <u>5' from PL/ROW</u>	Center Line Setback <u>65'</u>	Rear Setback <u>5'</u>	CUP/Variance/COA <u>RN</u>
	Side Setback <u>5'</u>	Side Setback <u>5'</u>	Flood Zone _____	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	COMMENTS: <u>* Survey Location Setbacks.</u>		

Planning & Zoning Officer: David [Signature] Date: 2/22/22

CONTRACTOR INFORMATION	Contractor <u>Self/owner</u>	Phone <u>804 836 2579</u>
	Address <u>1574 Birch Rd Manakin Sabot VA 23103</u>	Email <u>gomelos92@gmail.com</u>
	Contractor License Number _____	Type <u>metal shed for storage</u>

DESCRIPTION OF WORK	Scope of Work: <u>18' x 41' enclosed metal shed 8 x 31' lean too</u>				
	Proposed Use <u>Storage</u>	Current Use _____	Environmental Impacts (stream crossing, wetlands, amt land disturbed) _____		
	SEWER Public/Private _____	WATER Public/Private _____	# of Bathrooms _____	# of Bedrooms _____	# of floors _____
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No _____	Finished Sq. Ft. _____	Unfinished Sq. Ft. <u>1066</u>	Total Sq. Ft. <u>1066</u>	

Building Only - Excludes All Trades Permits

Value of Work <u>17,000.00</u>	<u>\$29,315.00</u>
-----------------------------------	--------------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: [Signature] Date: 1/20/22

Application Fee	\$ <u>143.92</u>
State Levy Fee	\$ <u>2.88</u>
Zoning Fee	\$ <u>25.00</u>
RLD	\$ _____
SWP	\$ _____
Total	\$ <u>171.80</u>



BUILDING PERMIT APPLICATION

Department of Building Inspection
 P.O. Box 119
 Goochland, VA 23063
 (804) 556-5815 Fax (804) 556-5651
 TDD 711 VA Relay

Application Date: 2/7/2022

Permit Number: BP-2022-00158

GPIN/Tax Map: Wenlon-12-7723 | 42-1-D-103-A

Issued: 2-23-22

Residential Commercial

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be scheduled until the permit is issued.

This application requires two copies of construction drawings and two copies of the survey of the property (if new construction or going outside of existing footprint) showing the dimensions and shape of parcels, all new work and existing structures, and setback distances from the front, sides, and rear lot lines. Lot lines must be clearly marked prior to calling for a footing inspection.

OWNER INFORMATION	Site Address <u>2938 River Road W, Goochland, VA 23063</u>	
	Owner <u>Goochland County</u>	Phone #
	Address <u>2938 River Road W, Goochland, VA 23063</u>	Email
APPLICANT INFORMATION	Applicant/Contact <u>Overhead Door Co. of Central Virginia / Samuel Greenwood</u>	
	Address <u>10391 Leadbetter Road, Ashland, Va 23005</u>	Phone # <u>804-550-1300</u>

TO BE COMPLETED BY ZONING DEPARTMENT	Subdivision <u>N/A</u>	Proffer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount _____	Date Paid _____
	Front Setback	Center Line Setback	Rear Setback	CUP/Variance/COA
	Side Setback	Side Setback	Flood Zone	
	APPROVED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/> COMMENTS: <u>*No change to Footprint use.</u>			

Planning & Zoning Officer: David Floyd Date: 2/9/22

CONTRACTOR INFORMATION	Contractor <u>Richmond Overhead Door Company of Central Virginia</u>		Phone <u>804-550-1300</u>
	Address <u>10391 Leadbetter Road, Ashland, VA 23005</u>		Email
	Contractor License Number <u>2701027206-A</u>	Type <u>Class A</u>	Expiration <u>12/31/2023</u>

DESCRIPTION OF WORK	Scope of Work: <u>Install Five (5) rolling grilles and Two (2) operators.</u> - public safety bldg				
	Proposed Use	Current Use	Environmental Impacts (stream crossing, wetlands, amt land disturbed)		
	SEWER Public/Private	WATER Public/Private	# of Bathrooms	# of Bedrooms	# of floors
	Will a foundation be installed within 20 ft. of any septic system components including reserve drain fields? Yes / No	Finished Sq. Ft.	Unfinished Sq. Ft.	Total Sq. Ft.	

Building Only - Excludes All Trades Permits

Value of Work	<u>\$48,805.00</u>
---------------	--------------------

I hereby acknowledge that I have read this application and know the information to be true and agree to comply with all County ordinances and State laws regulating building construction and use.

Signature of Applicant: Samuel Greenwood Date: 2/7/2022

Application Fee	\$0
State Levy Fee	\$0
Zoning Fee	\$0
RLD	\$0
SWP	\$0
Total	\$0

fees waived, county project



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date	2-9-2022
Permit #	EL-2022-00198
GPIN	
Tax Map	

LOCATION

Street Address: 3661 W. ROCKETTS RIDGE CT 23153

PROPERTY OWNERSHIP

Name	KENNETH HERRING	Phone	804-385-5007
Mailing Address	3661 W. ROCKETTS RIDGE CT.	Email	KHERRING@YAHOO.COM

APPLICANT

Name	Virginia Power Solutions	Phone	804-365-0263
Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	INSTAUS@virginiapowersolutions.com

CONTRACTOR

Name	Virgina Power Solutions	Phone	804-365-0263
Mailing Address	10102 Whitesel Road, B, Ashland, VA 23005	Email	INSTAUS@virginiapowersolutions.com
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2705123991
		Expiration	8/31/22
		License Type	ELE, GFC
		Class	B

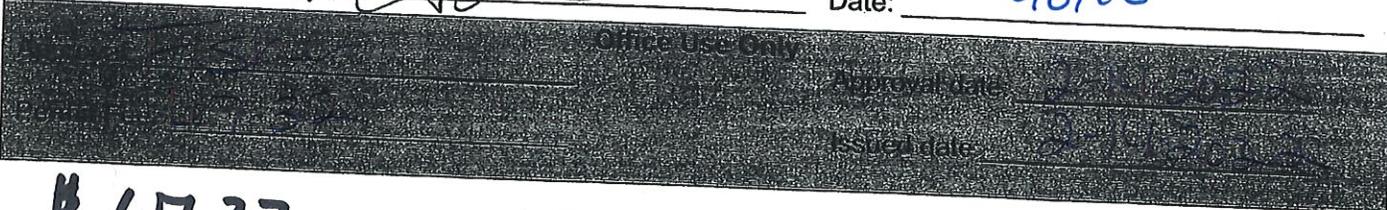
DESCRIPTION OF WORK

INSTALL 22kw GENERATOR & 200A SWITCH

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)			
\$10,000.00			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Date: 2/8/22



\$ 67.32

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date	29-2022
Permit #	ELI-2022-00189
GPIN	
Tax Map	

LOCATION

Street Address 565 CHURCH HILL ROAD 23103

PROPERTY OWNERSHIP

Name	<u>KRIS KING</u>	Phone	<u>804-402-5879</u>
Mailing Address	<u>565 CHURCH HILL RD</u>	Email	<u>KBKING8434@GMAIL.COM</u>

APPLICANT

Name	<u>Virginia Power Solutions</u>	Phone	<u>804-365-0263</u>
Address	<u>10102 Whitesel Road, B, Ashland, VA 23005</u>	Email	<u>INSTAUS@virginiapowersolutions.com</u>

CONTRACTOR

Name	<u>Virgina Power Solutions</u>	Phone	<u>804-365-0263</u>
Mailing Address	<u>10102 Whitesel Road, B, Ashland, VA 23005</u>	Email	<u>INSTAUS@virginiapowersolutions.com</u>
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	<u>2705123991</u>
		Expiration	<u>8/31/22</u>
		License Type	<u>ELE, GFC</u>
		Class	<u>B</u>

DESCRIPTION OF WORK

INSTALL 22kw GENERATOR & 2-200A SWITCHES

# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)			
<u>10,000.00</u>			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: [Signature] Date: 2/18/22

Office Use Only

Approval date: 2/14/22

Issued date: 2/14/22

\$ 67.32

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date: 2-9-2022

Permit #: ELI-2022-00188

GPIN:

Tax Map:

LOCATION

Street Address: 2304 HOBBY HILL DRIVE 23063

PROPERTY OWNERSHIP

Name: TAMMY TICKLE Phone: 804-519-9398

Mailing Address: 2304 HOBBY HILL DRIVE Email: TTICKLE@COMCAST.NET

APPLICANT

Name: Virginia Power Solutions Phone: 804-365-0263

Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTAUS@virginiapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions Phone: 804-365-0263

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005 Email: INSTAUS@virginiapowersolutions.com

Gas Certification: YES NO

State License Number: 2705123991 Expiration: 8/31/22 License Type: ELE, GFC Class: B

DESCRIPTION OF WORK

INSTALL 22kw GENERATOR & 2-200A SWITCHES

of Bathrooms: Service Size: Power Company: Inquiry #:

Value of Work (required): 10,000.00

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Date: 2/8/22

Office Use Only

Approval date:

Issue date:

\$ 607.32

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date: 2-9-2022

Permit #: ELI-2022-00187

GPIN:

Tax Map:

LOCATION

Street Address: 3851 OLD STAGE ROAD 23063

PROPERTY OWNERSHIP

Name: VERNELL BURTON

Mailing Address: 3851 OLD STAGE ROAD

Phone: 804-512-5652

Email: VERNELL.BURTON@GOOCHLANDCOUNTY.COM

APPLICANT

Name: Virginia Power Solutions

Address: 10102 Whitesel Road, B, Ashland, VA 23005

Phone: 804-365-0263

Email: IN37AUS@virginiapowersolutions.com

CONTRACTOR

Name: Virginia Power Solutions

Mailing Address: 10102 Whitesel Road, B, Ashland, VA 23005

Phone: 804-365-0263

Email: IN37AUS@virginiapowersolutions.com

Gas Certification: YES NO

State License Number: 2705123991

Expiration: 8/31/22

License Type: ELE, GFC

Class: B

DESCRIPTION OF WORK

INSTALL 24KW GENERATOR & 2-150A SWITCHES. GAS BY OTHERS.

of Bathrooms: _____ Service Size: _____ Power Company: _____ Inquiry #: _____

Value of Work (required): \$ 10,000.00

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Date: 2/8/22

Office Use Only

Approval date: _____

Issue date: _____

\$ 69.32

(owner's statement on back)

CK# 1198

214



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Department of Building Inspection

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD (804) 556-5317

2-9-22

Date	1-04-2022
Permit #	211-2022-00110
GPIN	
Tax Map	

- Type:
- Electrical
 - Mechanical
 - Plumbing
 - Gas

*This application is not authorization to start work.
No work shall start until a permit is posted on the
job site. No inspections will be made until the
permit has been issued.*

LOCATION

Street Address	180 WOODFERN	District	
----------------	---------------------	----------	--

PROPERTY OWNERSHIP

Name	MANNY DESSYPRIS	Phone	804-360-5323
Mailing Address	180 WOODFERN		

APPLICANT

Name	WOODFIN HEATING	Phone	8047644534
E-Mail Address	HTRIPLETT@ASKWOODFIN.COM		

CONTRACTOR

Name	WOODFIN HEATING	Phone	804-730-5000
Mailing Address	1823 N. HAMILTON STREET RICHMOND, VA 23230		E-mail address: HTRIPLETT@ASKWOODFIN.COM
Gas Certification	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number	2701037820
Expiration	11/2022	License Type:	CONTRACTOR
		Class:	A

DESCRIPTION OF WORK

INSTALL 22KW GENERATOR, (2) 200 AMP ATS.			
# of Baths	Service Size	Power Company	Inquiry #

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

I _____ of (address) _____ affirm that I am the owner of a certain tract or parcel of land located at _____
I affirm that I am not subject to licensure as a contractor or subcontractor as required by section 54.1.1111 of the Code of Virginia.

(Signature)

Signed and acknowledged by _____ in the city or county of _____, Virginia on the _____ day of _____, 20____ in the presence of the undersigned notary.

(Notary) My commission expires _____

Signature of Applicant *[Signature]* Value of Work: 12,775.00
Permit fee: 80.06
Approval *[Signature]* Date 2-9-22 Issue date: 2-9-22



RESIDENTIAL TRADES PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date: 2-2-22

Permit #: EU-2022-00143

GPIN:

Tax Map:

LOCATION

Street Address: 1915 Granite Trace Lane, Crozier VA 23039

PROPERTY OWNERSHIP

Name: Brittany Valentine Phone: 804-317-3006

Mailing Address: 1915 Granite Trace Lane, Crozier VA 23039 Email: brittany.vicatos@yahoo.com

APPLICANT

Name: Brittany Valentine Phone: "

Address: " Email: "

CONTRACTOR

Name: Owner Phone:

Mailing Address: Email:

Gas Certification: YES NO

State License Number: Expiration: License Type: Class:

DESCRIPTION OF WORK

Install New 22KW Generator and 200amp Transfer

of Bathrooms: Service Size: 400amp Power Company: Dominion Inquiry #:

Value of Work (required): \$10,000

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: [Signature] Date: 2-2-22

Office Use Only

Approval: Fisher Approval date: 2-3-22

Permit Fee: \$67.32 Issued date: 2-3-22

Please call or visit our website to calculate fee: www.goochlandva.us/permitcalc



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date 2-3-22
Permit # EU-2022-00142
GPIN
Tax Map

LOCATION

Street Address
5045 ANGE Rd

PROPERTY OWNERSHIP

Name DJ WARE	Phone 804 426-8148
Mailing Address 5045 ANGE Rd LOUISA VA 23093	Email

APPLICANT

Name ROBERT PERKINS	Phone 804 338-6028
Address 5420 CARTERSVILLE Rd POWHATAN 23139	Email DIVELEC@YAHOO.COM

CONTRACTOR

Name DIVERSIFIED ELECTRICAL SVCS.		Phone SAA	
Mailing Address SAA		Email SAA	
Gas Certification YES <input type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705102906	Expiration 2/22	License Type CENT
		Class A	

DESCRIPTION OF WORK

HOOK UP OWNER SUPPLIED 22KW GENERATOR & TRANSFER SWITCH.			
# of Bathrooms	Service Size	Power Company CENTRAL	Inquiry #
Value of Work (required) 2000			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: [Signature] Date: 2-3-22

Approval: Fisher	Office Use Only Approval date: 2-3-22
Permit Fee: 30.00	Issued date: 2-3-22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date 02/24/22
Permit # 22-266
GPIN
Tax Map

LOCATION

Street Address 3751 Shannon Hill Rd. Columbia VA 23038

PROPERTY OWNERSHIP

Name William Washington	Phone 434-389-4464
Mailing Address 3751 Shannon Hill Rd. Columbia VA 23038	Email rosetta.b.washington@gmail.com

APPLICANT

Name MW Butler Electrical	Phone 804-746-2240
Address 8420 Meadowbridge Rd. Mechanicsville VA 23116	Email kelsey@mwbutterelectrical.com

CONTRACTOR

Name MW Butler Electrical	Phone 804-746-2240
Mailing Address 8420 Meadowbridge Rd. Mechanicsville VA 23116	Email kelsey@mwbutterelectrical.com
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705110673
Expiration 01/31/24	License Type Contractors
	Class A

DESCRIPTION OF WORK

Wire and install a 22kw generator with a 200AMP transfer switch.			
Dominion Power			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$ 2,450.00			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Kelsey Crane Date: 02/24/22

Approval: Fisher	Office Use Only
Permit Fee: 32.67	Approval date: 3/1/22
	Issued date: _____



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date
Permit # 22-194
GPIN
Tax Map

LOCATION

Street Address 3906 Terry Lane. Goochland VA 23063

PROPERTY OWNERSHIP

Name Wendell Holmes	Phone 804-385-7275
Mailing Address 3906 Terry Lane Goochland VA 23063	Email wendell@alfon

APPLICANT

Name Kelsey Crowe	Phone 804-746-2240
Address 8420 Meadowbridge Road Mechanicsville VA 23116	Email kelsey@mwbutterelectrical.com

CONTRACTOR

Name MW Butler Electrical		Phone 804-746-2240	
Mailing Address 8420 Meadowbridge Road Mechanicsville VA 23116		Email kelsey@mwbutterelectrical.com	
Gas Certification YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number 2705110673	Expiration 01/31/24	License Type Contractors
		Class A	

DESCRIPTION OF WORK

Wire and install 22kW generator with a 200A			
ATS. Dominion			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required) \$2,450.00			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Kelsey Crowe Date: 02/09/22

Office Use Only

Approval: Fisher	Approval date: 2/16/22
Permit Fee: 32.60	Issued date: 2/16/22



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Type:	<input type="checkbox"/> Commercial
	<input checked="" type="checkbox"/> Residential
Trade:	<input type="checkbox"/> Fire
	<input checked="" type="checkbox"/> Electrical
	<input type="checkbox"/> Mechanical
	<input type="checkbox"/> Plumbing
	<input type="checkbox"/> Gas

Date	02/10/22
Permit #	22-197
GPIN	
Tax Map	

LOCATION

Street Address	2495 Brooks Creek Road Goochland VA 23063
----------------	---

PROPERTY OWNERSHIP

Name	Lenso Haywood	Phone	804-247-3655
Mailing Address	2495 Brooks Creek Road	Email	lenso.phaywood@gmail.com

APPLICANT

Name	Kelsey Crone	Phone	804-746-2240
Address	8420 Meadowbridge Rd. Mechanicsville VA 23116	Email	kelsey@mwbbutlerelectrical.com

CONTRACTOR

Name	MW Butler Electrical	Phone	804-746-2240
Mailing Address	8420 Meadowbridge Road	Email	kelsey@mwbbutlerelectrical.com
Gas Certification	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	State License Number	2705110673
		Expiration	01/31/24
		License Type	contractor
		Class	A

DESCRIPTION OF WORK

Wire and install a 24kw generator with a 200A ATS.			
Dominion			
# of Bathrooms	Service Size	Power Company	Inquiry #
Value of Work (required)		\$2,450.00	

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Kelsey Crone Date: 02/10/22

Office Use Only

Approval: <u>Fisher</u>	Approval date: <u>2/16/22</u>
Permit Fee: <u>32.67</u>	Issued date: <u>2/16/22</u>

Parker, Ashley

From: Kelsey Crone <kelsey@mwbutlerelectrical.com>
Sent: Wednesday, February 16, 2022 3:07 PM
To: Parker, Ashley
Subject: RE: property ownership

CAUTION: EXTERNAL EMAIL

Vera Brooks Walters. Finding it very frustrating how Mr. Haywood did not know that information. Like I said we don't always get the property owner when we get these jobs. Though I wish that was the case so that situations like this could be avoided. Sorry for all of the back and forth. I appreciate your help

Thank you.

Kelsey Crone
M. W. BUTLER ELECTRICAL, LLC
8420 Meadowbridge Road, Suite I
Mechanicsville, VA 23111
[Phone \(804\) 746-2240](tel:8047462240)
[Fax \(804\) 559-2243](tel:8045592243)

From: Parker, Ashley <aparker@goochlandva.us>
Sent: Wednesday, February 16, 2022 3:00 PM
To: Kelsey Crone <kelsey@mwbutlerelectrical.com>
Subject: RE: property ownership

Vera is the correct first name – last name is not correct. I struck through it in the previous e-mail.

Need the correct last name please.

Ashley Parker | Customer Service Center Manager
Goochland County | Community Development
P.O. Box 119
Goochland, VA 23063
Office: 804-556-5866
Fax: 804-556-5651
aparker@goochlandva.us



From: Kelsey Crone <kelsey@mwbutlerelectrical.com>
Sent: Wednesday, February 16, 2022 2:06 PM
To: Parker, Ashley <aparker@goochlandva.us>
Subject: RE: property ownership

CAUTION: EXTERNAL EMAIL

Good Afternoon,

After speaking to Mr. Lenso, he confirmed with me that the name that should be under the property ownership is Vera Burton. Please let me know if otherwise.

Thank you!!

Kelsey Crone
M. W. BUTLER ELECTRICAL, LLC
8420 Meadowbridge Road, Suite I
Mechanicsville, VA 23111
Phone (804) 746-2240
Fax (804) 559-2243

From: Parker, Ashley <aparker@goochlandva.us>
Sent: Wednesday, February 16, 2022 12:46 PM
To: Kelsey Crone <kelsey@mwbutlerelectrical.com>
Subject: property ownership

Good afternoon Kelsey –

The property ownership you listed for 2495 Brooks Creek Road does not match what we have to record.

Please provide correct ownership for processing.

Best,

Ashley Parker | Customer Service Center Manager
Goochland County | Community Development
P.O. Box 119
Goochland, VA 23063
Office: 804-556-5866
Fax: 804-556-5651
aparker@goochlandva.us





TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee www.goochlandva.us/permitcalc

Date

Permit # 22-205

GPIN

Tax Map

LOCATION

Street Address 904 Hermitage Road, Manakin Sabot, VA 23103

PROPERTY OWNERSHIP

Name <u>Larry Weber</u>	Phone <u>804-718-9055</u>
Mailing Address <u>904 Hermitage Road, Manakin Sabot, VA 23103</u>	Email <u>Larry.weber904@gmail.com</u>

APPLICANT

Name <u>Amber Blough</u>	Phone <u>804-218-6045</u>
Address <u>1735 Arlington Rd, Richmond, VA 23230</u>	Email <u>ablough@master-electrical.com</u>

CONTRACTOR

Name <u>Master Electrical Services LLC</u>	Phone <u>804-231-1973</u>			
Mailing Address <u>1735 Arlington Rd, Richmond, VA 23230</u>	Email <u>ablough@master-electrical.com</u>			
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number <u>2705181240</u>	Expiration <u>9-30-2023</u>	License Type <u>Contractors</u>	Class <u>A</u>

DESCRIPTION OF WORK

Installation of (1) 22kW generator with (2) Gen-Ready Panels, 200 amp. Wired 70 feet #1 SER + Romex.

# of Bathrooms	Service Size	Power Company	Inquiry #
<u>\$6,000</u>			
Value of Work (required)			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: [Signature] Date: 2-10-2022

Approval: <u>Fisher</u>	Office Use Only	Approval date: <u>2/18/22</u>
Permit Fee: <u>48.90</u>		Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

- Type:
- Commercial
 - Residential
- Trade:
- Fire
 - Electrical
 - Mechanical
 - Plumbing
 - Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date
Permit # 22-204
GPIN
Tax Map

LOCATION

Street Address

PROPERTY OWNERSHIP

Name Diane Bishop	Phone 804-833-6067
Mailing Address 3003 Preston Park Terrace, Sandy Hook, VA 23103	Email

APPLICANT

Name Amber Blough	Phone 804-218-6045
Address	Email ablough@master-electrical.com

CONTRACTOR

Name Master Electrical Services LLC	Phone 804-231-1973			
Mailing Address 1735 Arlington Rd, Richmond, VA 23230	Email ablough@master-electrical.com			
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 21705181240	Expiration 9-30-2023	License Type Contractors	Class A

DESCRIPTION OF WORK

Installation of a 22KW generator and 200 amp ATS wired by 50 feet #1 SER & Romex.			
# of Bathrooms	Service Size	Power Company	Inquiry #
\$6,000			
Value of Work (required)			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Date: 2/10/2022

Approval: <u></u>	Office Use Only	Approval date: <u>2/10/22</u>
Permit Fee: <u>48.90</u>		Issued date: _____

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department

P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type:

Commercial

Residential

Trade:

Fire

Electrical

Mechanical

Plumbing

Gas

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Date
Permit # 22-203
GPIN
Tax Map

LOCATION

Street Address 3885 Big Hickory Drive
--

PROPERTY OWNERSHIP

Name Dan Brown	Phone 804-980-0813
Mailing Address 3885 Big Hickory Drive, Goochland, VA 23063	Email dan.and.sharon@verizon.net

APPLICANT

Name Amber Blough	Phone 804-218-6045
Address	Email

CONTRACTOR

Name Master Electrical Services LLC		Phone 804-231-1973	
Mailing Address 1735 Arlington Road, Richmond, VA 23230		Email ablough@master-electrical.com	
Gas Certification YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	State License Number 2705181240	Expiration 9-30-2023	License Type Contractors
		Class A	

DESCRIPTION OF WORK

Installation of 24KW generator with 200 amp ATS by 50 ft PVC pipe through garage #1 THHN wiring			
# of Bathrooms	Service Size	Power Company	Inquiry #
\$6,000			
Value of Work (required)			

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: AM Date: 2/10/2022

Office Use Only

Approval: ESHER Approval date: 2/18/22

Permit Fee: 48.90 Issued date: 2/18/22

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department
P. O. Box 119 Goochland, VA 23063

(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

Type: Commercial Residential

Trade: Fire Electrical Mechanical Plumbing Gas

Date: 2/9/22
Permit #: 22-223
GPIN
Tax Map

LOCATION

Street Address: 13245 Piney Grove Court Richmond VA 23238

PROPERTY OWNERSHIP

Name: Max Comess Phone: 804-543-0528
Mailing Address: 13245 Piney Grove Court Richmond VA Email: max.comess@gmail.com

APPLICANT

Name: Scarlett Henshelt/Clark Home Solutions LLC Phone: 804-302-4200
Address: 9830 West Broad St. Richmond VA 23060 Email: Henshelt@Generatord.com
Supercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC Phone: 804-302-4200
Mailing Address: 14018 Sullyfield Cir Ste E Email: SHenshelt@Generator.com
Supercenter.com
State License Number: 2705176647 Expiration: 8/31/22 License Type: Masters Class: A

DESCRIPTION OF WORK

100 ft of Electrical Run from 2 x 200 Amp transfer
Switches to 48 kw Generator Install
of Bathrooms: 3
Value of Work (required): 22,200
Power Company: Inquiry #

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Scarlett Henshelt Date: 2/9/22

Approval: FISHOR Office Use Only

Approval date: 2/23/22

Permit Fee: 109.22 Issued date:

(owner's statement on back)



TRADE PERMIT APPLICATION

Goochland County Building Inspection Department
P. O. Box 119 Goochland, VA 23063
(804) 556-5815 Fax (804) 556-5651 TDD 711 VA Relay

Type: Commercial Residential

Trade: Fire Electrical Mechanical Plumbing Gas

Date: 2/12/22
Permit #: 22-222
GPIN
Tax Map

This application is not authorization to start work. No work shall start until a permit is posted on the job site. No inspections will be made until the permit has been issued.

Please call or visit our website to calculate fee
www.goochlandva.us/permitcalc

LOCATION

Street Address: 724 Meadows View Ridge - Manakin-Sabot, VA 23103

PROPERTY OWNERSHIP

Name: Steve Garrigues Phone: 804.338.3500

Mailing Address: 724 Meadows View Ridge - Manakin-Sabot, VA 23103
Email: Steve@gmims.com

APPLICANT

Name: Scarlett Hansbell / Clark Home Solutions LLC Phone: 804.302.4200

Address: 9830 West Broad St. Richmond VA 23060
Email: Shansbell@Generatorsupercenter.com

CONTRACTOR

Name: Clark Home Solutions LLC Phone: 804.302.4200

Mailing Address: 14018 Sullyfield Cir Ste E Email: Shansbell@Generatorsupercenter.com

State License Number: 2705176647 Expiration: 8/31/22 License Type: Masters Class: A

DESCRIPTION OF WORK

24kw Generator install. 75' Above Ground Electrical run

through crawl space from 2 x 200 Amp Switch to Generator
of Batching: _____ Power Company: _____ Inquiry #: _____

Value of Work (required): \$ 1000

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of Goochland County.

Signature of Applicant: Scarlett Hansbell Date: 2/12/22

Office: Use Only

Approval: Fisher Approval date: 2/22/22

Permit Fee: 30.00 Issued date: _____

(owner's statement on back)